

Medicare Minute Script – June 2015

New to Medicare and Enrollment Periods

It is important to learn the basics of Medicare requirements and options for enrollment to make the most of your coverage and avoid costly mistakes.

Point 1: Understand the rules for enrolling for the first time in Medicare.

Medicare is the federally administered program that provides health care coverage if you are 65+ or under 65 and have a disability. There are two ways to get Medicare Parts A (hospital insurance) and B (medical insurance): through automatic enrollment by the federal government OR by signing up yourself. If you receive Social Security retirement or disability benefits, you will be automatically enrolled in Medicare when you first qualify. If you are NOT receiving retirement or disability benefits, you need to actively sign up during one of three enrollment periods:

- **Initial Enrollment Period (IEP)** – When you are first eligible for Medicare, you have a seven-month period to sign up. This includes the three months before you turn 65, the month you turn 65, and the three months after you turn 65.
- **General Enrollment Period (GEP)** – If you miss your IEP, you can sign up from January 1 through March 31 each year. Your coverage will begin July 1 of that year. Note that you may have to pay a higher premium for late enrollment if you miss your IEP.
- **Special Enrollment Period (SEP)** – If you or your spouse (or family member, if you are disabled) is currently working and you are covered by health insurance through that current employer or union, you will have an SEP to enroll in Part B while you are working or within eight months of your coverage ending.

Point 2: Understand your Medicare coverage choices.

You can choose to receive your Medicare benefits in one of two ways: through Original Medicare OR a Medicare Advantage Plan.

1. **Original Medicare** is the traditional fee-for-service insurance program offered by the federal government and includes Part A and Part B coverage. To get Medicare drug coverage (Part D) with Original Medicare, you will need to join a stand-alone Medicare Prescription Drug Plan (PDP). Under Original Medicare, you have the option of purchasing supplemental insurance coverage in the form of a Medigap policy. Medigap policies are sold by private companies and can help pay some of the health care costs that Original Medicare doesn't cover, like copayments, coinsurance, and deductibles. Note that Medigaps do not help pay for Medicare premiums.
2. **Medicare Advantage** plans are private health plans that contract with the federal government to administer Medicare benefits. These plans must offer all benefits offered by Original Medicare. They may also offer additional benefits, such as routine vision or dental care. Each Medicare Advantage Plan can charge different out-of-pocket costs and have different coverage rules. Note that most Medicare Advantage plans offer drug coverage as part of their benefits package.

The State Health Insurance Assistance Program (SHIP) can help you compare and evaluate your choices.

Point 3: Understand when you can change your Medicare coverage.

Medicare limits how often you can make changes to your Medicare coverage. You can make changes every calendar year during the fall Open Enrollment Period (OEP) from October 15 to December 7. Changes made to your coverage will take effect January 1 of the next year. Before making changes, confirm all the details regarding your new plan with the plan itself.

Additionally, you may be able to change your Medicare coverage during the calendar year if you meet certain requirements, such as if you move to a new home or nursing home or if you qualify for certain programs that help pay Medicare costs. Finally, if you are unhappy with your Medicare Advantage Plan, you can switch to Original Medicare during the Medicare Advantage Disenrollment Period (MAPD) from January 1 through February 15 each year. Note that Medicare Advantage and drug plans must follow certain rules when promoting their products. It is illegal for plans to send you unsolicited emails, request payment over the telephone, or visit you in your home or nursing home room without an invitation. If you have experienced any of these marketing fraud tactics, you should file a report by calling your local Senior Medicare Patrol (SMP).

Take Action Point:

- 1) Enroll in Medicare during your enrollment period to avoid costly penalties.
- 2) Carefully review the details of Original Medicare and Medicare Advantage Plans before choosing your Medicare coverage.
- 3) Make changes during the Medicare-approved timeframes to avoid gaps in coverage, and report suspicious activity to your local SMP.
- 4) If you want one-on-one assistance and counseling with help understanding enrollment, choosing your Medicare coverage, or making changes to your coverage, contact your SHIP program. For help finding your state SHIP, visit www.shiptacenter.org or call 877-839-2675.

Local SMP Contact Information

SMP toll-free:

SMP email:

SMP website:

To find an SMP in another state: Call 877-808-2468 or visit www.smpresource.org.

The production of this document was supported by Grant No. 90NP0003 from the Administration for Community Living (ACL). Its contents are solely the responsibility of the Senior Medicare Patrol (SMP) National Resource Center and do not necessarily represent the official views of ACL.